

manifestations, and lastly cases with systolic apical murmurs without evidence of any cardiac hypertrophy. These cases, however, have a definite history of severe attacks of tonsillitis or acute rheumatic fever. He believes these are cases of early organic heart disease, and the method of treatment is directed toward cleaning up all focal infections.

T. K.

THE MEDICAL CLINICS OF NORTH AMERICA. Volume II, Number 6, Baltimore No. Pp. 297; 7 illustrations. Philadelphia and London: W. B. Saunders Company, May, 1919.

DR. LEWELLYS F. BARKER reports a case of funicular myelitis with an early blood picture of only a secondary anemia. He points out the frequent nervous lesions associated with the anemias. A careful differential diagnosis between parasyphilis, multiple sclerosis and transverse myelitis is considered. The etiology and pathology with reference to the recent literature is also added. Dr. Julius Friedenwald gives his personal experiences in the treatment of ulcer of the stomach. He gives a brief review of the various medical treatments used in peptic ulcer, including the Leube cure; the Lenhartz cure; the Sippy cure; comparative results of the various forms of treatment; Einhorn's duodenal alimentation; brief discussion of the surgical treatment. The advantage of pyloroplasty over gastro-enterostomy, as compared upon a similar 100 cases, is given with from 8 to 11 per cent. better immediate and final results in favor of the pyloroplasty. Medically, the Sippy cure has been the one adopted in his clinic. It is described somewhat in detail. The follow-up system with the roentgen-ray studies is called attention to as the only sure way of judging the healing process of the ulcer. A diet list used following the ulcer treatment as well as the one comprising the actual treatment is appended. In another short article he reports 41 cases of true achylia gastrica and 37 spurious achylas as determined by the fractional method. Some of the true achylas occurred in chronic gastritis, gastric ulcer, gastric carcinoma, pernicious anemia, cholelithiasis, syphilis of the stomach, pulmonary tuberculosis, and, after an operation, where a pylorotomy and gastro-enterostomy had been done. He contrasts the low total acid, free HCl curve with the hypermotility in the true achylas and that of the chronic gastritis cases wherein which the total acid curve is higher, associated with a large quantity of mucus and oftentimes a delayed motility. Dr. Gordon Wilson lays special stress upon the necessity of convincing one's patient that he has the disease in the treatment of pulmonary tuberculosis. Thinking that this is the first fundamental and to help the patient to realize that tuberculosis is essentially a chronic disease, passing through periods of apparent

quiescence without symptoms. The remainder of the treatment must be entirely individualized according to the patient's means, social status, etc. The climate will not cure the disease, but the life which the patient leads in that climate is the most important.

Pneumococcus sepsis in contradistinction to local and focal infection, with full discussion of symptoms, prognosis and treatment, is described by Dr. Paul W. Clough. He believes that more urgent search for positive blood cultures in pneumonia is needed. He also thinks that the cases which get well give a positive culture early, later becoming sterile, while in the malignant cases the opposite is true. Blood cultures showing more than 5 colonies to the cubic centimeter of blood gives a less favorable prognosis. The method of invasion of the blood stream is described. Serum treatment in large doses in Type I infections only is advocated. The literature on the subject is partially reviewed. Gastro-intestinal disturbances in metabolic diseases and diseases of the ductless glands are set forth by Dr. John H. King. The role of diet in the treatment of digestive disorders, with a description of irritation and non-irritating foods as used in various disorders, is given in detail by Dr. E. H. Gaither. Dr. Louis Hamman describes diabetes with reference to the latest literature and complete physiological processes.

T. K.

SURGICAL TREATMENT. By JAMES PETER WARBASE, Surgeon to the Wyckoff Heights Hospital, Brooklyn, New York. Volume III. Pp. 861; 865 illustrations. Philadelphia and London: W. B. Saunders Company, 1919.

IN this third and final volume the author maintains the standard set in its predecessors. It continues abdominal surgery through hernie, affections of the liver and gall-bladder, male genito-urinary and female genital organs. The affections of the upper and lower extremities, not included in the other two volumes, plastic and cosmetic surgery and some phases of surgery not previously considered, complete the volume. Among the last a chapter on electricity and radiation and another on the economics of surgical treatment deserve special attention. An appendix of twenty pages was apparently added to include material after the chapter to which it properly belongs had been completed and gone to print, indicating the desire of the author to include all available valuable new facts.

A survey of the three volumes impresses one with their general excellence. The dominating feature seems to lie in the number and quality of its illustrations, and the greatest value of these is seen in the diagrammatic simplicity with which the essential phases are emphasized. As to the frequency with which they are employed it is not uncommon to find two and three on one page and some-